								Application or Docket Number						
	PATENT A	PPLICATIO Effect	09853038											
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS								RATE	[]	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			23 minus 20=		. 3			X\$ 9=			OR	X\$18=	54	
INDEPENDENT CLAIMS			3 minus 3 =		*		X40=				OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT			+135=			=		OR	+270=	,	
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in c	column 2 TOTA			L		OR	TOTAL	76%	
CLAIMS AS AMENDED - PART II									ı		•	OTHER	THAN	
(Column 1) (Column 2) (Column 3)								SMAL	LL E	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X40=	=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											.070		
								+135 TO			OR	+270= TOTAL		
								ADDIT. F			OR	ADDIT. FEE		
		(Column 1) CLAIMS	· · · · · · · · · · · · · · · · · · ·		ımn 2) HEST	(Column 3)	1			455	.		r:	
AMENDMENT B	ing the form	REMAINING AFTER AMENDMENT		NUI PREV	MBER HOUSLY D FOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***	IT O. 4.1.	=	1	X40=	=		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135	i=	-	OR	+270=		
								TO ADDIT. F	TAL		OR	TOTAL ADDIT. FEE		
			AUUII. F	1		-	AUUII. FEE							
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	JMN 2) HEST MBER TOUSLY D FOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= ,		X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=		-	ł	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR			
+135=											OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."														
		imber Previously Pa nber Previously Pa					er fo	und in the	е ар	propriate bo	x in co	olumn 1.		